

## DISCLOSURE SUMMARY PAGE

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FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9093
Logged In	9:46
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File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

COMMITTEE NAME (Must be same as on Statement of Organization)

Humboldt Republican Central Comm.

#1146

IMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
 Subdivision PAC (11) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Rogers Lindeman

SIGNATURE OF PERSON FILING REPORT

515 332 1344

TELEPHONE

1-2-08

DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 2☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

1-4-07

\$

1169.42

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below).....

555.00

Schedule F: Loans Received total (Attach Schedule F).....

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

1724.42

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).....

972.89

Schedule F: Loan Repayments total (Attach Schedule F).....

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$

1451.53

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

# 1146

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-16-07	ID# CK# 1125	Postmaster Humboldt	STAMPS	\$ 19.50
4-25-07	ID# CK# 1126	Carmela Frisich Fair Booth	Booth for County Fair	75.00
8-1-07	ID# CK# 1127	N/S	Flag for Fair Booth Drawing	43.63
8-1-07	ID# CK# 1128	Fareway	PEANUTS to give at Fair Booth	60.96
8-21-07	ID# CK# 1129	Postmaster	Post Office Box Rent	36.00
12-31-07	ID# CK# 1130	Humboldt Independent	Advertising from JAN 3rd caucus	37.80
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 272.89
TOTAL (If last page of this schedule)				\$ 272.89

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page \_\_\_\_\_ of \_\_\_\_\_

(for Schedule B)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) #1164  
Humboldt Republican Central Comm.

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4-23-07	ID# CK#	6015 ANN JOHNSON 610 9th St S. Humboldt IA 50548		\$ 100.00	<input type="checkbox"/>
5-10-07	ID# CK# CAGH	JOE TILLIE 105 2nd St Rutland IA 50982		100.00	<input type="checkbox"/>
5-10-07	ID# CK#	Ken Meyer 99 Wood St N Dakota City IA 50549		30.00	<input type="checkbox"/>
5-4-07	ID# CK#	WALT JENSEN 811 N 13th Humboldt IA 50548		100.00	<input type="checkbox"/>
6-7-07	ID# CK# 2880	John Doden PO Box 39 Humboldt IA 50548		100.00	<input type="checkbox"/>
5-10-07	ID# CK#	Doug Bacon 11 Woodland Dr Humboldt IA 50548		100.00	<input type="checkbox"/>
10-5-07	ID# CK# 1907	KATH GILBERTSON 1609 Rainbow Dr Cedar Falls IA 50613		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 555.00  
\$ 555.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_  
(for Schedule A)